Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003							18382					
-		CLAIMS AS	PART I 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			29					RATE	FEE] [RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		84	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		* 9			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			2 minus 3 =		* 2			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero,					"0" in c	:olumn 2	L	TOTAL	-	OR	TOTAL	IXK
CLAIMS AS AMENDED - PART II								'	<u> </u>		OTHER	
(Column 1)			(Column			(Column 3)	umn 3) SMAI		ENTITY	OR	SMALL	,
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus			-		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=	
								+ 140= TOTAL		OR	TOTAL	
								DIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)	. –		A 75 TO 1	, ,	,	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	:	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- CI AII-1	=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	 [:	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J ├─			1		
*	If the entry in col-	mn 1 is less than t	he entry in cel	umn 2 weite	e "O" in ^^	olumn 3	L	+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is I ss than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is I ss than 3, enter "3."											
		mber Previously Pa					or found	d in the app	od essingor	x in co	lumn 1.	

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